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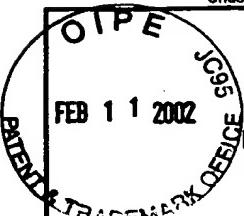
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Approved for use through 10/31/2002 OMB 0651-0032

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**DECLARATION
AND
POWER OF ATTORNEY
FOR UTILITY OR DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration Submitted with Initial Filing Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)
OR

Attorney Docket Number	JBP-555
First Named Inventor	Lukenbach
COMPLETE IF KNOWN	
Application Number	09/905,387
Filing Date	July 13, 2001
Group Art Unit	1619
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SELF FOAMING CLEANSING GEL
(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) **July 13, 2001** as United States Application Number or PCT International Application Number **09/905,387** and was amended on (MM/DD/YYYY)

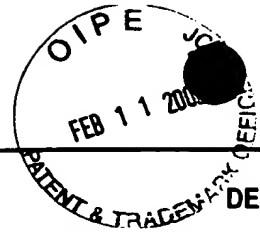
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:



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DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/218,483	July 14, 2000	

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

Application Serial No.	Filing Date	Status
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		Patented
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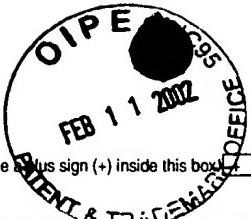
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NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Elvin		Family Name or Surname Lukenbach	
Inventor's Signature <i>Elvin Lukenbach</i>	Date 10/18/01		
Residence: City Flemington	State NJ	Country USA	Citizenship USA
Mailing Address 160 Klinesville Rd.			
City Flemington	State NJ	ZIP 08822	Country USA
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Karine		Family Name or Surname Dupre	
Inventor's Signature	Date		
Residence: City Orleans 4500	State	Country France	Citizenship France
Mailing Address 11 rue Antigna			
City Orleans 4500	State	ZIP	Country France
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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Susan		Family Name or Surname Niemiec	
Inventor's Signature <i>Susan Niemiec</i>	Date 10/18/2001		
Residence: City Yardley	State PA	Country USA	Citizenship USA
Mailing Address 1808 Waterford Road			
City Yardley	State PA	ZIP 19067	Country USA



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Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

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NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Elvin		Family Name or Surname	Lukenbach
Inventor's Signature		Date	
Residence: City Flemington	State NJ	Country USA	Citizenship USA
Mailing Address 160 Klinesville Rd.			
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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Karine		Family Name or Surname	Dupre
Inventor's Signature		Date 11.4.2001	
Residence: City Orleans 4500	State	Country France	Citizenship France
Mailing Address 11 rue Antigna			
City Orleans 4500	State	ZIP	Country France
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
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Given Name (first and middle [if any]) Susan		Family Name or Surname	Niemiec
Inventor's Signature		Date	
Residence: City Yardley	State PA	Country USA	Citizenship USA
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City Yardley	State PA	ZIP 19067	Country USA